

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ji</i>		<i>7/22/12</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		<i>71473</i>	<i>10-3-00</i>
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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8/23/12	
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Claim	Date
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Original	
6/23/12	
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If more than 150 claims or 10 actions  
staple additional sheet here

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